

In The United States Court of Federal Claims
Form 2
Cover Sheet

Plaintiff(s) or Petitioner(s)

23-145 C

Names: National Industries for the Blind; Assoc. for Visual Rehabilitation and Employment, Inc.; & National Assoc. for Employment of People Who Are Blind

Location of Plaintiff(s)/Petitioner(s) (city/state): Alexandria, VA (NIB and AVRE) & Binghamton, NY (NAEPB)

(If this is a multi-plaintiff case, pursuant to RCFC 20(a), please use a separate sheet to list additional plaintiffs.)

Name of the attorney of record (See RCFC 83.1(c)): Tracye Winfrey Howard

Firm Name: Wiley Rein LLP

Contact information for pro se plaintiff/petitioner or attorney of record:

Post Office Box: none
Street Address: 2050 M Street NW
City-State-ZIP: Washington, DC 20036
Telephone Number: (202) 719-7452
E-mail Address: twhoward@wiley.law

Is the attorney of record admitted to the Court of Federal Claims Bar? Yes No

Nature of Suit Code: 138

Select only one (three digit) nature-of-suit code from the attached sheet.

Agency Identification Code: GSA

Number of Claims Involved: 1

Amount Claimed: \$ 0

Use estimate if specific amount is not pleaded.

Bid Protest Case (required for NOS 138 and 140):

Indicate approximate dollar amount of procurement at issue: \$ 0

Is plaintiff a small business?

Yes No

Was this action proceeded by the filing of a protest before the GAO?

Yes No

Solicitation No. 47QSCC23R0002

If yes, was a decision on the merits rendered? Yes No

Income Tax (Partnership) Case:

Identify partnership or partnership group: _____

Takings Case:

Specify Location of Property (city/state): _____

Vaccine Case:

Date of Vaccination: _____

Related case:

Is this case directly related to any pending or previously filed case(s) in the United States Court of Federal Claims? If yes, you are required to file a separate notice of directly related case(s). See RCRC 40.2.

Yes No